

M17000008852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

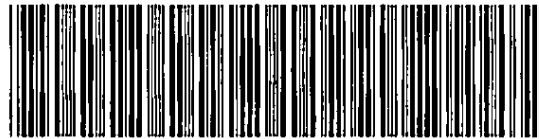
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500304436215

10/16/17--01011--005 **130.00

2017 OCT 16 FRI 12:20
Filing Office

OCT 18 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sklarco L.L.C.
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Steven R. Hatcher, Jr., Vice President - General Counsel
Name of Person

Sklarco L.L.C.
Firm/Company

401 Edwards St., Ste 1601
Address

Shreveport, LA 71101
City/State and Zip Code

shatcher@sklarexploration.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven R. Hatcher, Jr. at (720) 306-8310
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Sklarco L.L.C.
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Louisiana 3. 72-1425432
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Date of filing of this Application
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0903, F.S. to determine penalty liability)

5. 401 Edwards Street, Ste. 1601 6. 401 Edwards Street, Ste. 1601
(Street Address of Principal Office) (Mailing Address)
Shreveport, LA 71101 Shreveport, LA 71101

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CORPORATE CREATIONS NETWORK, INC
 Office Address: 11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, Florida 33410
(City) (Zip code)

Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Timothy Pratts, Special Secretary
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Manager</u>	<u>Howard F. Sklar</u> <u>401 Edwards St., Ste 1601</u> <u>Shreveport, LA 71101</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Use attachments if necessary)

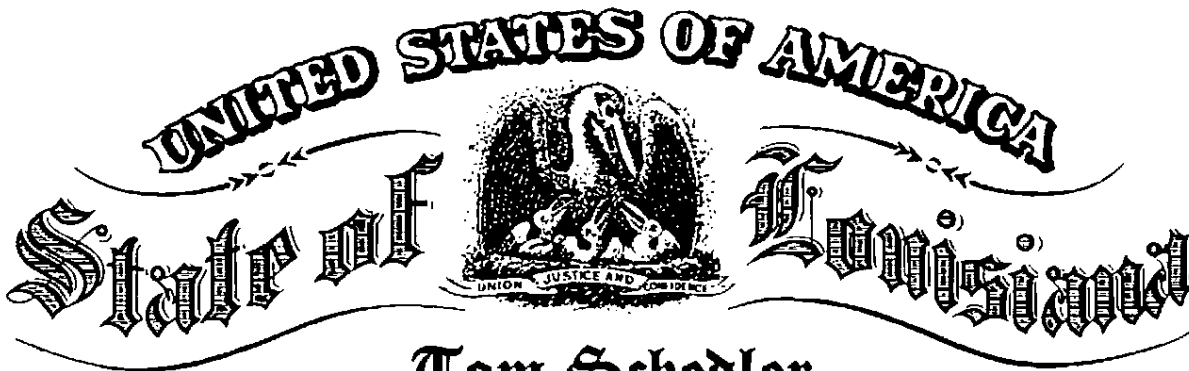
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Steven R. Hatcher, Jr.
Signature of an authorized person

Steven R. Hatcher, Jr.
Typed or printed name of signee

2017 OCT 16 PM 12:20



Tom Schedler
SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that

the Articles of Organization of

SKLARCO L.L.C.

Domiciled at SHREVEPORT, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on August 24, 1998,

I further certify that no Certificate of Dissolution or Termination has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

October 4, 2017

Secretary of State

Web 34677968K



Certificate ID: 10876109#P8Q83

To validate this certificate, visit the following web site, go to **Business Services, Search for Louisiana Business Filings, Validate a Certificate**, then follow the instructions displayed.
www.sos.la.gov